

## PART B - FEE(S) TRANSMITTAL

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7590

09/20/2005

Siemens Corporation  
 Intellectual Property Department  
 170 Wood Avenue South  
 Iselin, NJ 08830

12/02/2005 CNGUYEN1 00000046 192179 10811257

01 FC:1501 1400.00 DA  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Barbara Quinn	(Depositor's name)
<i>Barbara Quinn</i>	(Signature)
December 2, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/811,257	03/26/2004	Sanford B. Proveaux	2004E03899US	1650

TITLE OF INVENTION: COMPRESSOR DIAPHRAGM WITH AXIAL PRELOAD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/20/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, NINH H	3745	415-001000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Siemens Westinghouse Power Corporation, Orlando, Florida (USA)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2179 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date December 2, 2005

Typed or printed name Erik C. Swanson

Registration No. 40,194

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TO: Mail Stop Issue Fee  
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FROM: Barbara Quinn, IP Specialist  
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Fax No.: 571-273-2885

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DATE: December 2, 2005

Number of Pages including cover page: 3

Re: **10/811,257** filing date: **03/26/2004**  
Attorney Docket No.: **2004P03899US**  
Issue Fee Date Due: **12/20/2005**  
Paper Dated: **12/02/2005**  
The required fees have been authorized to be charged to Deposit Account 19-2179.

**Certification of Transmission under 37 CFR 1.8**

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Facsimile Cover Sheet (1 pg.)  
PTOL-85 PART B-FEE(S) TRANSMITTAL (2 pgs., original + 1 copy)

Barbara Quinn  
Barbara Quinn

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**Siemens Corporation**

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